

Menopause – Happy Ageing

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ABSTRACT

This article is a comprehensive review of menopause. It comprises the meaning, significance, stages, symptoms experienced, their causes, medical management, alternative therapies and dietary supplementation to be included in the menopausal period.

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INTRODUCTION

Health of women is one of society's most critical issues because women must be physically, mentally and emotionally well before they can devote themselves to consider other important social issues impacting women (Figure 1).

Definition

Menopause is a familiar process that occurs because of a decline in the function of the ovaries, which also control oestrogen origination.

In addition to a decrease in oestrogen levels, menopause results in decreased progesterone levels, meaning that any eggs that are released are less likely to be fertilized.

Menopause is that particular point in time when a woman's menstrual periods stop. Some people call the years foremost up to a woman's last period "menopause," but that time actually is perimenopause (PER-ee-MEN-oh-pawz).

Periods can stop for a while and then start again, so a woman is considered to have been through menopause only after a full year without periods [1].



Fig. 1. Woman at menopause.

When Does Menopause Occur?

There is no predicting when the menopause will occur.

- Generally, it is between the ages of 40 and 55.
- It can vary for a few women as it can start as early as 35 or as late as 60.
- Unusually early menopause (before the age of 36, sometimes as young as 18) may have implications that need to be addressed [2].

When Does Menopause Occur?

- Periods can gradually become further apart, they may be scantier and not last as long [3].
- Some women have heavier bleeding with shorter gaps in between.
- Frequently, menstruation just stops altogether with no warning.
- For majority of women, menopause will last no more than a couple of years.
- Few of the women experience symptoms for as long as five or six years or even longer.

Climacteric

The phase in the aging process of women marking the transition from the reproductive stage of life to the non-reproductive stage.

Climacteric Phases Include

- Perimenopause: "It is the time around menopause" and is usually used to refer to the menopausal transitional period.
- Postmenopause: Refers to the period after one year of absence of menstruation:
- The climacteric is represented by endocrinal, somatic and transitory psychological variation.
- Premenopausal phase: The period of beginning physiological failure of ovarian function and it lasts for a period ranging from 2 to 6 years.

Symptoms – Physical Symptoms: Aches and Pains

- Dry skin and hair
- Lack of sleep
- Weight gain
- Feeling dizzy or faint
- Pressure or tightness in head
- Parts of body feel numb
- Headaches
- Bone density loss

- Loss of feeling in hands or feet
- Breathing difficulties
- Tiredness and lethargy
- Vaginal dryness
- Changes in libido and sexual enjoyment
- Anxiety
- Depression
- Mood swings [2]

Skin Changes

- Dryness, loss of elasticity, and weaking of the skin arise around the time of menopause, along with raised wrinkles.
- The sensation of crawling on or under the skin, called formication, is relieved by oestrogen therapy.
- Acne may occur and may followed by unwanted hair growth.
- Many women observe devaluation in their teeth after menopause.
- Decreased saliva will increase gingivitis (bleeding gums) and sometimes changes in taste and smell.

Vulva and Vagina

- Dry vagina and vulva are usual symptoms at menopause.
- It is normal for the labia (vulval lips) to become thinner with menopausal hormonal changes.
- Vulval dryness can damage other vulval skin problems (e.g. eczema) which starts itching and irritation.
- Urinary frequency and incontinence are more typical around the time of menopause.
- The most common cause of incontinence is an overactive or irritable bladder. Vaginal oestrogen therapy may help this condition.
- Unrestraint treatments include medication, physiotherapy and surgery. These may be studied after further investigations of the incontinence have been undertaken.



Joints and Muscles

- Joint and muscle aches and pains are common during menopause.
- Osteoarthritis (inflammation of the joints).
- Exercise is n vital part of management of these symptoms.
- HRT will improve the joint and muscle aches.

Hair

- During menopause the women notice increased facial hair.
- Thinning of scalp and pubic hair is also common.
- Treatments for increased facial hair include waxing, laser therapy and antitestosterone medication.

Hot Flashes (or Flushes)

These can cause:

- Sudden feelings of heat on whole body over or in the upper part of your body
- Flushing of your face and neck
- Red blotches are found on your chest, back, and arms
- Heavy sweating followed by cold shivering after the flash

Psychological Changes

- Heart beating quickly or strongly
- Feeling tense or nervous
- Difficulty in sleeping
- Excitable
- Attacks of anxiety, panic
- Difficulty in concentrating
- Feeling tired or lacking in energy
- Loss of interest in most things
- Feeling unhappy or depressed
- Crying spells
- Irritability
- Mood swings can vary from tearfulness and irritability to depression
- Depression may be more likely in the years immediately before the menopause, especially if you have

- experienced premenstrual syndrome (PMS) in the past
- Panic attacks including palpitations, shortness of breath or dizziness
- Poor memory and concentration (Figure 2).

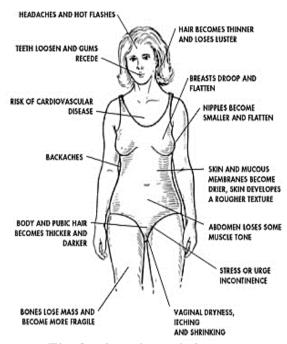


Fig. 2. Physiological changes.

Associated Changes – Bone Loss

Lower oestrogen > Bone loss Bone loss > Bones weaken > Osteoporosis Treatment – calcium and vitamin D

Risk of Cardiac Disease

- Heart attacks and strokes
- Tests for cholesterol and high blood pressure
- Exercising
- Following a healthy diet

Hysterectomy and Menopause

- Hysterectomy without removal of ovaries – NO menopause right away.
- Ovaries might still generate hormones, so you might not have different other signs of menopause.
- Hot flashes may be present because the surgery may affect the blood supply to the ovaries.

 Later on, natural menopause may occur a year or two earlier than usually expected.

Menopause and Sexuality

- Decreased libido (decreased sex drive)
- Some may experience increased enjoyment of sex, due to the fact that they no longer need to worry about pregnancy
- Decreased sex drive may occur due to:
- Hot flashes leads to discomfort and irritation
- Vaginal dryness will lead to discomfort during intercourse
- Decreased levels of androgen (male hormone) alongwith testosterone, which minimizes libido
- Menopause also influence sexuality through the physical changes that accompany it
- Decreased level of blood flow to the pelvis, which leads to a smaller and less elastic vagina
- Thinning and tendering of the vaginal walls, making sex more painful
- Due to decreased pelvic muscle support urinary leakage occur

Treatment of Menopause

- Hormone therapy
- Oestrogen and progesterone therapy
- Transdermal patch
- Applying betadine topically on the outer vaginal area, soaking in a sitz bath
- Soaking in a warm water in bathtub may be useful for relieving symptoms of burning and vaginal pain after intercourse

Menopause-Hormone Replacement

Menopausal hormone therapy (MHT), also called hormone replacement therapy (HRT), associate taking the hormones oestrogen and progesterone. MHT can help with menopause by:

- Reduces hot flashes with night sweats, and associated problems such as poor sleep and irritability
- Treating vaginal symptoms
- Slowing bone loss
- Possibly easing mood swings and mild depressive mood

Hot Flashes-Management

- Try to avoid things that may leads to hot flashes, like spicy foods, alcohol, caffeine, stress, or being in a hot place.
- Dress in layers (light clothing to avoid sweating).
- Use a fan both in your home or workplace.
- Try taking slow and deep breaths when a hot flash starts.
- MHT, which can be very useful in treating hot flashes and night sweats.

Oestrogen Replacement Therapy

- Oral oestrogen
- Transdermal oestrogen
- Gel containing oestrogen
- Oestrogen implants
- Vaginal oestrogen

Management of Sleeping Problems

- Try to be physically active (but not too close to bedtime, since exercise might make you more awake).
- Avoid taking large meals, smoking, and working right before the bed. Avoid caffeine after noon.
- Keep your bedroom dark, quiet, and cool. Use your bedroom only for sleep and sex.
- Avoid napping during the day.
- Try to keep sleeping and waking times same every day.
- If you cannot get to sleep, get up and read until you are tired.
- If hot flashes are the cause of sleep problems, treating the hot flashes generally will help.



Mood Swings

- Try to get enough sleep and staying physically active to feel your best.
- Consider consulting a therapist or joining a support group.
- If MHT are used for hot flashes or another menopause symptom, mood swings may get better.

Alternative Medical Therapies

Plant oestrogens (phytoestrogens, isoflavones). Two types of isoflavones, genistein and daidzein, are found in soy beans, chick peas, and lentils, and are considered to be the most potent oestrogens of the phytoestrogens [4].

Supplements for Menopausal Changes *Calcium in Diet*

Make sure you get adequate calcium and vitamin D in your diet to reduce the risk of osteoporosis. As a general rule of thumb, the recommendation is at least 1,000 mg of

calcium a day from food or supplements (Figure 3).

Essential Fatty Acids (EFAs)

- Essential fatty acids (EFAs), such as nuts, seeds and oily fish, can be very effective if the skin becomes dry or if you suffer from joint pains. Omega-6 families, found in pumpkin seeds, oily fish, walnuts, linseeds, dark green vegetables and oils such as sesame, walnut, soya and sunflower.
- EFAs can also help in preventing vaginal dryness and bladder infections, as well as increasing your mental and physical energy.

Diet Changes

Avoid caffeine, alcohol, and spicy foods. Eat soy foods. Soy contains oestrogen. Get plenty of calcium and vitamin D in food or supplements [5].



Fig. 3. Menopausal changes.

Herbal Therapy

- Isoflavones good sources include soy products, beans (such as lima beans, chickpeas)
- Lignans good sources include fruit, vegetables and grains, and oilseeds such as linseed
- Coumestans good sources include sprouting seeds such as alfalfa

Soy

- This is equivalent to consuming any one of 220 g of tofu, three cups of soymilk, 56 g of soy flour or two cups of cooked soybeans daily.
- Soy contains phytoestrogens.
- These are substances from a plant that may act like the oestrogen in our body makes best sources are foods such as tofu, soymilk, and soy nuts.

Exercises

- Get plenty of exercise.
- Do Kegel exercises every day as they strengthen the muscles of your vagina and pelvis.
- Practice slow, deep breathing when a hot flash starts.
- Try taking six breaths a minute.
- Meditation.

Life Style Changes

- To reduce heart disease control blood pressure, cholesterol, and other risk factors
- Eat a low-fat diet
- Get regular exercise
- Take calcium and vitamin D
- Smoking cessation
- Practice yoga regularly
- See an acupuncture specialist

Physical Activity

At least 2 hours and 30 minutes a week of moderate aerobic physical activity *or* 1 hour and 15 minutes of vigorous aerobic activity *or* some combination of the two. Exercises that build muscle strength on two days each week [6].

CONCLUSION

Every woman should pass through this stage of her life with relaxation and comfort. An awareness of these changes enables women to experience Menopause as a happy ageing journey.

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